AGREEMENT TO PERFORM VOLUNTARY SERVICES

PARK/PROGRAM:	
Volunteer Name: Address: Address: Telephone: Cell Phone: E-mail:	
DESCRIPTION OF WORK TO BE PERFORI	MED:
Campground Host	Visitor Services
Interpretive Services	Maintenance
Museum & Historic Preservation	Special Projects
 Arizona State Parks will provide the Volu volunteer agrees to abide by all such poli The Volunteer understands that s/he is was a State employee. The Volunteer understands that s/he will member and will report to his/her supervi The Volunteer understands that s/he is Noreceived and read the Volunteer Insurance 	be working directly under the supervision of an assigned park staff for the number of volunteer hours provided. IOT covered by the State's workers' compensation plan and has be information Form (Please initial). time by either the Volunteer or Arizona State Parks. plicable)
I hereby acknowledge that I am volunteering pay and in order to enhance the recreation, h	my services at State Park without istoric, aesthetic and scenic environment of Arizona State Parks.
Volunteer Signature	Date
Signature of Parks Representative	Date
SEPARATION INFORMATION	
The above agreement was terminated on: Signature of Parks Representative:	